

02-04-02

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NON-PROVISIONAL
UTILITY PATENT APPLICATION
TRANSMITTAL - 37 CFR 1.53(b)

☐ Duplicate
(check, if applicable)



Assistant Commissioner for Patents
BOX PATENT APPLICATION
Washington, DC 20231

Attorney Docket No. 054756-5003US
First Named Inventor: Giannetti, Bruno, et al.
Express Mail Label No. EL524688720US
Total Pages of Transmittal Form: 2

Transmitted herewith for filing is the **non-provisional** utility patent application entitled:

KIT FOR CHONDROCYTE CELL TRANSPLANTATION

which is:

an ☐ Original; or

a ☒ Continuation, ☐ Divisional, or ☐ Continuation-in-part (CIP)
of prior pending PCT Application PCT/IB00/01093 filed on August 2, 2000
(International Publication No. WO01/08610 published on February 8, 2001 [copy
enclosed]); Provisional Patent Application No. 60/146,683, filed on August 2, 1999.

Enclosed are:

- ☒ Specification (including Abstract) and claims: 20 pages.
- ☐ Newly executed/unexecuted Declaration (original/copy).
- ☐ Copy of Declaration from prior application.
- ☐ Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).
- ☒ 3 sheets of drawings (formal) plus one copy.
- ☐ Microfiche computer program (Appendix).
- ☐ Nucleotide and/or Amino Acid Sequence Submission, including:
 - ☐ Computer readable copy ☐ Paper Copy (_ pages)
 - ☐ Verified Statement
- ☐ Under PTO-1595 cover sheet, an assignment of the invention.
- ☐ Certified copy(ies) of _____ Application No. _____, filed _____, is filed:
 - ☐ herewith or ☐ in prior application _____.
- ☐ Applicants, by their undersigned attorney, claim Small Entity Status under 37 C.F.R. §1.27 as ☐ an Independent Inventor, or ☐ a Small Business Concern, or ☐ a Non-Profit Organization
- ☐ Preliminary Amendment.
- ☐ Information Disclosure Statement, PTO-1449 and cited references
- ☒ Other: Application Data Sheet (2 sheets)

The filing fee has been calculated as shown below:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$355			BASIC FEE: \$710	
Total	16-20 =	0	X	\$ 0	OR	X__	\$
Independent	3- 3 =	0	X	\$ 0	OR	X__	\$
Multiple Dependent Claims Present: 0			\$	\$ 0	OR	\$__	\$
			TOTAL	\$ 0	OR	TOTAL	\$710.00

- ☐ The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.
- ☒ A check in the amount of \$ 710.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-0310 (Billing No. 054756-5003US)** as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee.
- ☐ Filing fee in the amount of \$ _____ as calculated above.
- ☒ Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- ☒ In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

CORRESPONDENCE ADDRESS:

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Enclosures